

PMS SPOT CHECK EVALUATION FORM

Department: _____ Work center: _____ Date PMS was performed: _____

Maintenance Person/Personnel: _____

Assessor: _____

MIP: _____ MRC: _____ Equipment Nomenclature: _____

- | | | | |
|---|-----|----|-----|
| 1. Maintenance person/personnel qualified to perform MR. | YES | NO | |
| 2. Presented validated MRC using the work center PMS Record. (Change page to LOEP to MIP to MRC). | YES | NO | |
| 3. Maintenance person reviewed the MRC before Accomplishment of the MR. | YES | NO | |
| 4. Discussed the appropriate safety precautions Including Hazardous Material, PPE, Tag out, etc... | YES | NO | |
| 5. Presented the correct tools, parts (NSN), Material (MILSPEC), and test equipment (calibrated). | YES | NO | |
| 6. Properly identified the equipment by using Location block, LGL, or EGL. | YES | NO | |
| 7. Demonstrated all steps of MR including all Notes, warnings, and cautions according to the MRC. | | | |
| a. Steps of the MRC | YES | NO | |
| b. Hazardous Material (use and disposal) | YES | NO | N/A |
| c. Tag out (Standard or PMS) | YES | NO | N/A |
| d. Safety | YES | NO | |
| 8. Report status of MR to work center supervisor If completed or not fully accomplished and Takes proper corrective action, (i.e.; enters Discrepancy in WCWL/JSN LOG or SNAP, submit Technical feedback report.) | YES | NO | |

_____	Department Head
_____	Division Officer
_____	Work Center LCPO
_____	Work Center Supervisor

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9. Assessment: **Fully Accomplished** **Not Accomplished**

NOTES: If all answers to spot check form are YES, then spot check is considered fully accomplished. If maintenance person is not fully qualified to perform the assigned MR, if any safety precautions, notes, caution or warning is violated during the performance of the MR, if any non-calibrated instruments, incorrect MILSPEC material/lubricant/solvents or incorrect repair parts were used, then spot check is considered automatically **not accomplished**.

COMMENTS:

Assessor's signature: _____ **Date:** _____